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Substitute for Form PTO-875								Application or Docket Number		
		CLAIMS AS		– PART I	•	01411	-	Z. OR		R THAN
	· · · · · · · · · · · · · · · · · · ·	(Co	lumn 1)	(Cc	dumn 2)	SMALL	ENIIIY) T	SMALL	ENTITY
	FOR NUMBER FILED			NUMBI	ER EXTRA	RATE	FEE/		RATE	FEE
BASIC FEE (37 CFR 1.16(a))					ļ	5_	OR		:730	
TOTAL CLAIMS (37 CFR 1.16(c)) / / minus 20			()		X \$ =		OR	x \$ =	1.	
IND	INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3			3 = 1	7	x s =		OR	x \$ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1/16(d))						+5 =		OR	+s =	1.
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	730
	_	LAIMS AS AM	ENDED	DADTI		ı				
	C	LAINS AS AM	ENDED	- PARTII					OTUE	
		(Column 1)		(Column 2)	(Column 3)	SMALL E	NTITY	OR -		R THAN ENTITY
NT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
AMENDMENT	Total (37 CFR 1.16(c))	27	Minus	730	3	x \$=		OR	x 50=	150
Ē	Independent (37 CFR 1.16(b))	.5	Minus	5	6	x \$=		OR	x \$200=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	+s =	
		······································				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	150
		(Column 1)		(Column 2)	(Column 3)	•				
~		CLAIMS	1	HIGHEST	1	· .		Ì	ſ	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
	Total (37 CFR 1.16(ct)	•	Minus	"	=	x \$=		OR	x \$=	. ·
	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$ =		OR	X \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									
	PINOT PRESER	IXIION OF MOETIFE	E DEPERO	ENT COMM (37 CF	1K 1.10(a))	TOTAL		OR	TOTAL	├──
						ADD'L FEE		OR	ADD'L FEE	<u> </u>
		(Column 1)		(Column 2)	(Column 3)			1		
N C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TION/ FEE
ME	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$=	·	OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x \$=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	+ \$ =	
	· . · · ·					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	If the entry in a	column 1 is less tha	in the entr	v in column 2. wrti	e 10° in column S		L	1	,	

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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